2006 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

Feb 17, 2006 08:00 AM **DOCUMENT # P99000083397 Secretary of State** PRECISION PREP MASTERS, INC. Principal Place of Business Mailing Address 600 101H AVE SOUTH 600 10TH AVE SOUTH SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695 No Chg-P CFRE034 (11/05) 02142000 DO NOT WRITE IN THIS SPACE Applied For FEI Number 59-3606159 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BOZMOSKI, JOHN JR. DO NOT WRITE 600 BYPASS DR., STE. 219 CLEARWATER, FL 33764 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Added to Fees FILE NOW!!! FEE 19 \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE WARD, RANDALL J NAME STREET ATIONESS 3579 FAIRVIEW ST SAFETY HARBOR, FL 34695 CITY-ST-ZIP πιε NAME 100000438446 STREET ADDRESS U3/01/Q6-80006-016 150.00 CITY-ST-ZIP TITLE NAME STREET ACCORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 1.m NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

HATED NAME OF SIGNING OFFICER OR DIRECTOR

FILED